

Receipt



PATENT APPLICATION

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1-25-01
Date

Cynthia Hagen
Cynthia Hagen

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Si Lok, Robyn L. Adams, Anna C. Jelmborg,
Theodore E. Whitmore, Theresa M. Farrah

Serial No. : 09/339,153

Filed : June 24, 1999

For : MAMMALIAN ZCYTOR 11

Examiner :

Art Unit : 1646

Docket No.: 97-52D1

Date : January 25, 2001

RECEIVED

APR 25 2001

TECH CENTER 1600/2900

Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

Sir:

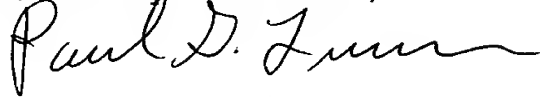
Attached is a copy of the official Filing Receipt received from the Patent and Trademark Office for the above-referenced application for which issuance of a corrected filing receipt is respectfully requested.

There is a typographical error in the docket number. The docket number should read as follows:

97-52D1

The correction is noted on the enclosed copy of the filing receipt.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Paul G. Lunn".

Paul G. Lunn, Esq.
Registration No. 32,743

Enclosures:

Copy of Filing Receipt
Postcard

FILING RECEIPT



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/339,153	06/24/99	1646	\$760.00	97-52D1		19	2

PAUL G LUNN
ZYMOGENETICS INC
201 EASTLAKE AVENUE EAST
SEATTLE WA 98102

DOCKETED

11/8/99 AT

NOV - 4 1999

PATENT DEPT.

This receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) SI LOK, SEATTLE, WA; ROBYN L. ADAMS, BELLEVUE, WA;
ANNA C. JELMBERG, ISSAQUAH, WA; THEODORE E. WHITEMORE,
REDMOND, WA; THERESA M. FARRAH, SEATTLE, WA.

CONTINUING DATA AS CLAIMED BY APPLICANT-

THIS APPLN IS A DIV OF 08/906,713 08/05/97 PAT 5,965,704

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/20/99
TITLE
MAMMALIAN ZCYTOR 11

PRELIMINARY CLASS: 536

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DATA ENTRY BY: WILSON, PAMELLA

TEAM: 12 DATE: 10/28/99

(See reverse for new important information)

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COMMISSIONER FOR PATENTS
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Bib Data Sheet

CONFIRMATION NO. 2249

SERIAL NUMBER 09/339,153	FILING DATE 06/24/1999 RULE	CLASS 536	GROUP ART UNIT 1646	ATTORNEY DOCKET NO. 97-52D1
APPLICANTS SI LOK, SEATTLE, WA; ROBYN L. ADAMS, BELLEVUE, WA; ANNA C. JELMBERG, ISSAQUAH, WA; THEODORE E. WHITEMORE, REDMOND, WA; THERESA M. FARRAH, SEATTLE, WA;				
** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 08/906,713 08/05/1997 PAT 5,965,704				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/20/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY WA	SHEETS DRAWING	TOTAL CLAIMS 19
INDEPENDENT CLAIMS 2				
ADDRESS PAUL G LUNN ZYMOGENETICS INC 1201 EASTLAKE AVENUE EAST SEATTLE, WA 98102				
TITLE CLASS TWO CYTOKINE RECEPTOR 11				
FILING FEE RECEIVED 800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	